Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF TENNESSEE	-	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Katherine First name Lynn Middle name Moore Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3609	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	104 Oak Court	If Debtor 2 lives at a different address:
		Hendersonville, TN 37075 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Sumner	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

Deb	otor 1 Katherine Lynn Mo	oore				Case number (if known)	
Par	t 2: Tell the Court About	our Bankruptc	y Case				
7.	The chapter of the Bankruptcy Code you are			on of each, see <i>Notic</i> of page 1 and check		/ 11 U.S.C. § 342(b) for Individuals Filing for Bankruate box.	ıptcy
	choosing to file under	Chapter 7					
		☐ Chapter 11					
		☐ Chapter 12					
		☐ Chapter 13					
		- Onapici 13					
8.	How you will pay the fee	about ho	w you may pay. T	ypically, if you are pa	aying the fee y	ck with the clerk's office in your local court for more vourself, you may pay with cash, cashier's check, or half, your attorney may pay with a credit card or che	money
				nstallments. If you clents (Official Form 10		ion, sign and attach the Application for Individuals to	o Pay
		☐ I reques	that my fee be v	waived (You may red	quest this optic	on only if you are filing for Chapter 7. By law, a judg	e may,
		applies to	your family size	and you are unable t	o pay the fee	our income is less than 150% of the official poverty in installments). If you choose this option, you must icial Form 103B) and file it with your petition.	
9.	Have you filed for	■ No.					
	bankruptcy within the last 8 years?	☐ Yes.					
		Dist	rict	W	hen	Case number	
		Dist	rict	W	hen	Case number	
		Dist	rict	W	hen	Case number	
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
	annate:	Deb	tor			Relationship to you	
		Dist	-	W	hen	Case number, if known	
		Deb				Relationship to you	
		Dist	rict	W	nen	Case number, if known	
11.	Do you rent your residence?	■ No. Go	to line 12.				
		☐ Yes. Ha	s your landlord of	btained an eviction ju	dgment again	st you?	
			No. Go to lin	e 12.			
			Yes. Fill out this bankrup		out an Eviction	a Judgment Against You (Form 101A) and file it as p	art of

Deb	tor 1 Katherine Lynn M	oore			Case number (if known)
	<u> </u>				
ar	Report About Any Bu	ısinesses	You Owr	as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
	business:	☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:
				Health Care Busi	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Rea	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as o	lefined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the abov	e
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadline operation	s. If you ir	ndicate that you are ow statement, and	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am r	not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
	Domant if You Court on	. Hava An		Dunamente au Au	Decreate That Needs Investigate Attention
Part	·		/ Hazardo	ous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.			
	alleged to pose a threat of imminent and identifiable hazard to public health or safety?	☐ Yes.	What is	the hazard?	
	Or do you own any property that needs immediate attention?			liate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
					Number, Street, City, State & Zip Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Desc Main

Jeb	tor 1 Katherine Lynn Me	oore			Case number ((if known)
art	6: Answer These Questi	ons for R	eporting Purposes			
6.	What kind of debts do you have?	16a.	individual primarily for a pers			ed in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.	Are your debts primarily but money for a business or inve			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you o	we that are not consume	er debts or business	debts
7.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. E are paid that funds will be ava	Do you estimate that afte ailable to distribute to ur	er any exempt proper nsecured creditors?	ty is excluded and administrative expenses
	administrative expenses		■ No			
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes			
8.	How many Creditors do	1 -49		1 ,000-5,000		□ 25,001-50,000
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000		☐ 50,001-100,000
	owe?	□ 100-1	99	1 0,001-25,000	0	☐ More than100,000
		□ 200-9	99			
9.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 - \$	\$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 -	\$50 million	☐ \$1,000,000,001 - \$10 billion
	be worth.		001 - \$500,000	□ \$50,000,001 -		□ \$10,000,000,001 - \$50 billion
		□ \$500,	001 - \$1 million	□ \$100,000,001	- \$500 million	☐ More than \$50 billion
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 - \$	\$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?	□ \$50,0	001 - \$100,000	□ \$10,000,001 -		□ \$1,000,000,001 - \$10 billion
	10 00.	\$100 ,	001 - \$500,000	\$50,000,001 -		\$10,000,000,001 - \$50 billion
		□ \$500,	001 - \$1 million	□ \$100,000,001	- \$500 million	☐ More than \$50 billion
art	7: Sign Below					
or	you	I have ex	amined this petition, and I dec	clare under penalty of pe	erjury that the informa	ation provided is true and correct.
						nder Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7.
			rney represents me and I did n at, I have obtained and read the			an attorney to help me fill out this
		I request	relief in accordance with the c	chapter of title 11, United	States Code, specif	fied in this petition.
		bankrupto and 3571	cy case can result in fines up t			property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Katheri	erine Lynn Moore ne Lynn Moore e of Debtor 1		Signature of Debtor 2	2
		Executed	on July 29, 2019	E	Executed on	
			MM / DD / YYYY			DD / YYYY

Debtor 1	Katherine Lynn Moore	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Richard	d Baranyi	Date	July 29, 2019	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Richard B	aranyi			
Printed name	aranyi			
Richard B	aranyi			
Firm name	<u>-</u>			
PO Box 21	83			
Henderso	nville, TN 37077-2183			
Number, Street,	City, State & ZIP Code			
Contact phone	615-824-3877	Email address	bbrb@bellsouth.net	
12374 TN				
Bar number & St	tate			

Fill in this in	formation to identify your	case:			
Debtor 1	Katherine Lynn M	loore			
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	MIDDLE DISTRICT OF	TENNESSEE		
Case number				_	k if this is an ded filing
Summary Be as comple information. F	te and accurate as possib	le. If two married people es first; then complete th	ad Certain Statistical Information are filing together, both are equally responsible for information on this form. If you are filing amend the box at the top of this page.	or supplyii	
Part 1: Sui	mmarize Your Assets				
				Your a	ssets of what you own
1. Schedul 1a. Copy	le A/B: Property (Official For Inne 55, Total real estate, for	orm 106A/B) om Schedule A/B		\$	289,000.00
1b. Copy	/ line 62, Total personal pro	perty, from Schedule A/B		\$	22,161.00
1c. Copy	line 63, Total of all property	y on Schedule A/B		\$	311,161.00
Part 2: Sui	mmarize Your Liabilities				
					abilities It you owe
	e D: Creditors Who Have Co		(Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	294,358.08
3. Schedul 3a. Copy	e E/F: Creditors Who Have the total claims from Part	Unsecured Claims (Official 1)	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	9,000.00
3b. Copy	the total claims from Part	2 (nonpriority unsecured cl	laims) from line 6j of Schedule E/F	\$	123,195.46
			Your total liabilities	\$	426,553.54
Part 3: Sur	mmarize Your Income and	Expenses		,	
	e I: Your Income (Official Four combined monthly incom		I	\$	3,571.51
	e J: Your Expenses (Official ur monthly expenses from li			\$	3,620.00
Part 4: Ans	swer These Questions for	Administrative and Stati	stical Records		
-	filing for bankruptcy undo You have nothing to report	•	neck this box and submit this form to the court with yo	ur other sc	hedules.
Yes	s nd of debt do you have?				
			debts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,938.65

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total cla	aim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	9,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	9,000.00

	tor 1 1/-4	havira I	unn Masss						
Der	tor 1 Kat		ynn Moore Middle	Name	Last Name				
Deb	tor 2								
Spo	use, if filing) First N	Name	Middle	Name	Last Name		-		
Jni	ed States Bankrupto	y Court for	the: MIDDLE DI	ISTRIC	Γ OF TENNESSEE				
as	e number								☐ Check if this is a
									amended filing
)f	icial Form 1	06A/E	3						
òC	hedule A	B: P	roperty						12/15
				an asset	only once. If an asset fits	in more than one	category, lis	t the asset in	
	Yes. Where is the proj	oorty/2							
		perty:							
.1	104 Oak Court	perty:		What	is the property? Check all th	at apply			
.1	104 Oak Court Street address, if available	,	scription	•	Single-family home				aims or exemptions. Put d claims on <i>Schedule D:</i>
.1		,	scription		Single-family home Duplex or multi-unit building	g	the amount	of any secure	
.1		,	scription	•	Single-family home Duplex or multi-unit building Condominium or cooperation	g ve	the amount	of any secure	d claims on Schedule D:
.1	Street address, if available	e, or other de			Single-family home Duplex or multi-unit building Condominium or cooperation Manufactured or mobile ho	g ve	the amount Creditors V Current va	of any secure Vho Have Clain	d claims on Schedule D: ns Secured by Property. Current value of the
.1	Street address, if available Hendersonville	e, or other dea	37075-0000		Single-family home Duplex or multi-unit building Condominium or cooperation Manufactured or mobile ho Land	g ve	Current va	of any secure Who Have Clair lue of the perty?	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
.1	Street address, if available	e, or other de			Single-family home Duplex or multi-unit building Condominium or cooperation Manufactured or mobile ho	g ve	Current va entire prop	of any secured the Have Clair lue of the perty?	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$289,000.00
.1	Street address, if available Hendersonville	e, or other dea	37075-0000		Single-family home Duplex or multi-unit building Condominium or cooperativ Manufactured or mobile ho Land Investment property	g ve	Current va entire prop	of any secured the Have Clair lue of the herty? 39,000.00 he nature of y	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
.1	Street address, if available Hendersonville	e, or other dea	37075-0000		Single-family home Duplex or multi-unit building Condominium or cooperation Manufactured or mobile ho Land Investment property Timeshare Other has an interest in the property	g ve me	Current va entire prop \$28 Describe ti (such as fe a life estati	of any secured the Have Clair lue of the herty? 39,000.00 he nature of yee simple, tense), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$289,000.0 our ownership interest
.1	Street address, if available Hendersonville City	e, or other dea	37075-0000		Single-family home Duplex or multi-unit building Condominium or cooperativ Manufactured or mobile ho Land Investment property Timeshare Other has an interest in the property Debtor 1 only	g ve me	Current va entire prop	of any secured the Have Clair lue of the herty? 39,000.00 he nature of yee simple, tense), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$289,000.0 our ownership interest
.1	Hendersonville City Sumner	e, or other dea	37075-0000		Single-family home Duplex or multi-unit building Condominium or cooperativ Manufactured or mobile ho Land Investment property Timeshare Other has an interest in the property Debtor 1 only Debtor 2 only	g ve me erty? Check one	Current va entire prop \$28 Describe ti (such as fe a life estati	of any secured the Have Clair lue of the herty? 39,000.00 he nature of yee simple, tense), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$289,000.00 our ownership interest
.1	Street address, if available Hendersonville City	e, or other dea	37075-0000		Single-family home Duplex or multi-unit building Condominium or cooperativ Manufactured or mobile ho Land Investment property Timeshare Other has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	g ve me erty? Check one	Current va entire prop \$28 Describe to (such as fe a life estate Fee sim)	of any secured who Have Clair lue of the serty? 39,000.00 he nature of yes simple, tende), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$289,000.00 our ownership interest
.1	Hendersonville City Sumner	e, or other dea	37075-0000		Single-family home Duplex or multi-unit building Condominium or cooperativ Manufactured or mobile ho Land Investment property Timeshare Other has an interest in the property Debtor 1 only Debtor 2 only	g we me erty? Check one and another	Current va entire prop \$28 Describe ti (such as fe a life estat Fee sim	of any secured who Have Clair lue of the perty? 39,000.00 the nature of yee simple, tense), if known. ple if this is compared the c	current value of the portion you own? \$289,000.0 cur ownership interest ancy by the entireties, c
.1	Hendersonville City Sumner	e, or other dea	37075-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile hoseland Investment property Timeshare Other has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors or information you wish to a	g we me erty? Check one and another	Current va entire prop \$28 Describe ti (such as fe a life estat Fee sim	of any secured who Have Clair lue of the perty? 39,000.00 the nature of yee simple, tense), if known. ple if this is compared the c	current value of the portion you own? \$289,000.0 cur ownership interest ancy by the entireties, c

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B

Schedule A/B: Property

Debt	tor 1 K	atherine Lynn Moore		Case number (if known)	
3. C a	ars, vans,	trucks, tractors, sport utility ve	hicles, motorcycles		
_					
_	No				
-	Yes				
		Ford		Do not deduct sec	ured claims or exemptions. Put
3.1	Make:		Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D:
	Model:	Escape	■ Debtor 1 only	Creditors Who Hav	ve Claims Secured by Property.
	Year:	2011 nate mileage: 110,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of t entire property?	he Current value of the portion you own?
		ormation:	☐ At least one of the debtors and another	chare property.	portion you own.
			— At least one of the debtors and another		
			☐ Check if this is community property	\$6,000	.00 \$6,000.00
			(see instructions)		
Exa	<i>amples:</i> B No Yes	oats, trailers, motors, personal wa	d other recreational vehicles, other vehicles, a tercraft, fishing vessels, snowmobiles, motorcycle	accessories	
.pa	ages you	have attached for Part 2. Write	n for all of your entries from Part 2, including a that number here		\$6,000.00
Part		be Your Personal and Household It	ems terest in any of the following items?		Current value of the
·			terest in any of the following items:		portion you own? Do not deduct secured claims or exemptions.
E		goods and furnishings Major appliances, furniture, linens scribe	, china, kitchenware		
		dressers, night	t, chairs, recliners, coffee/end tables, lam stands, chests, desk, kitchen table/chairs /dryer, microwave, vac, lawnmower, yard ppliances, misc household goods	, refrig,	\$1,500.00
E		Televisions and radios; audio, vid including cell phones, cameras, n	eo, stereo, and digital equipment; computers, print nedia players, games	iers, scanners; music co	ollections; electronic devices
		tvs, dvd, vcr			\$500.00
9. E c	No I Yes. De quipment xamples:	Antiques and figurines; paintings, other collections, memorabilia, co scribe for sports and hobbies Sports, photographic, exercise, ar musical instruments	prints, or other artwork; books, pictures, or other a llectibles and other hobby equipment; bicycles, pool tables, go		
L	l Yes. De	scribe			

Official Form 106A/B Schedule A/B: Property page 2

Debtor '	Katherine Ly	ynn Moc	ore	Case	number (if known)	
10. Fire Exa		s, shotgur	ns, ammunition, and relat	ed equipment		
■ No				• •		
□ Ye	es. Describe					
	amples: Everyday cl o	othes, fur	s, leather coats, designer	wear, shoes, accessories		
■ Ye	es. Describe					
		clothe	es .			\$300.00
	amples: Everyday je	welry, cos	stume jewelry, engageme	ent rings, wedding rings, heirloom jewelry,	, watches, gems, gol	d, silver
		custor	m jewelry			\$50.00
		Custoi	iii jeweii y			
Exa	a-farm animals amples: Dogs, cats, o es. Describe	birds, hor	rses			
		cat, ra	hhits			\$0.00
		[50.0, 10.				
■ No □ Ye	o es. Give specific inf Id the dollar value	ormation.	your entries from Part 3	lready list, including any health aids y , including any entries for pages you h		\$2,350.00
Part 4:	Describe Your Finan	cial Asset	s			
Do you	own or have any I	egal or e	quitable interest in any	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	amples: Money you o		our wallet, in your home,	in a safe deposit box, and on hand when	you file your petition	
				C	ash	\$40.00
					uJII	Ψτυ.υυ
Exa	institutions.			; certificates of deposit; shares in credit u the same institution, list each. Institution name:	nions, brokerage ho	uses, and other similar
		17.1.	Checking	US Bank		\$100.00
						-
		17.2.	savings	US Bank		\$60.00

Official Form 106A/B

Schedule A/B: Property

page 3

De	ebtor 1	Katherine Lyn	n Moore	Case number (if known)	
18.		, mutual funds, or	publicly traded stocks	rage firms, money market accounts	
	■ No □ Yes		Institution or issuer nam	ne:	
19.	joint v	ublicly traded stoc enture	k and interests in incorporat	ted and unincorporated businesses, including an interest in	an LLC, partnership, and
	■ No □ Yes.	Give specific inform	mation about them Name of entity:	% of ownership:	
20.	Negoti	<i>iable instrument</i> s in	clude personal checks, cashie	ble and non-negotiable instruments rs' checks, promissory notes, and money orders. er to someone by signing or delivering them.	
	☐ Yes.	Give specific inform	nation about them Issuer name:		
21.	Examp □ No □		A, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plan	ıs
	■ Yes.	List each account s	separately. Type of account:	Institution name:	
			401K	thru employer	\$13,000.00
	Your s Examp ■ No		deposits you have made so that	at you may continue service or use from a company slic utilities (electric, gas, water), telecommunications companies Institution name or individual:	, or others
	Annuit ■ No □ Yes	·	a periodic payment of money to	o you, either for life or for a number of years)	
	Interest	ts in an education C. §§ 530(b)(1), 529	IRA, in an account in a quali 9A(b), and 529(b)(1).	ified ABLE program, or under a qualified state tuition progrately file the records of any interests.11 U.S.C. § 521(c):	ı m .
25.	Trusts			r than anything listed in line 1), and rights or powers exercis	sable for your benefit
	■ No □ Yes.	Give specific inform	mation about them		
26.			emarks, trade secrets, and on names, websites, proceeds f	other intellectual property from royalties and licensing agreements	
			mation about them		
27.			d other general intangibles ts, exclusive licenses, coopera	tive association holdings, liquor licenses, professional licenses	
	☐ Yes.	Give specific inform	mation about them		
M	oney or	property owed to	you?		Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

De	btor 1	Katherine Lynn Moore		C	ase number (if known)	
28.	Tax re	funds owed to you				
	■ No					
	☐ Yes.	Give specific information about the	em, including whether you alrea	dy filed the returns and	d the tax years	
29.		/ support	v anavaal aynnam ahild aynna	rt maintananaa diyara	a cattlement property	a attlement
	Exam □ No	ples: Past due or lump sum alimon	y, spousai support, chiid suppo	rt, maintenance, divorc	e settlement, property	settiement
	Yes.	Give specific information				
					child support	\$611.00
30.		amounts someone owes you ples: Unpaid wages, disability insur benefits; unpaid loans you m		fits, sick pay, vacation	pay, workers' comper	nsation, Social Security
	■ No					
	☐ Yes.	Give specific information				
31.		sts in insurance policies				
	<i>Exam</i> □ No	ples: Health, disability, or life insura	ance; health savings account (F	ISA); credit, homeowne	er's, or renter's insuran	ice
		Name the insurance company of e	each policy and list its value.			
		Company n		Beneficiary	y:	Surrender or refund value:
						value.
		term life t	hrough employer			\$0.00
	If you	nterest in property that is due you are the beneficiary of a living trust, one has died.			urrently entitled to rece	eive property because
	☐ Yes.	Give specific information				
	Exam ■ No	s against third parties, whether of ples: Accidents, employment dispu			or payment	
34.	Other	contingent and unliquidated clai	ms of every nature, including	counterclaims of the	e debtor and rights to	set off claims
	■ No		•		_	
	☐ Yes.	Describe each claim				
	Any fi ■ No	nancial assets you did not alread	ly list			
	☐ Yes.	Give specific information				
36		the dollar value of all of your ent art 4. Write that number here	, ,			\$13,811.00
Pai	rt 5: De	escribe Any Business-Related Proper	ty You Own or Have an Interest Ir	n. List any real estate in	Part 1.	
	•	own or have any legal or equitable in o to Part 6.	terest in any business-related pro	operty?		
_	_	Go to line 38.				

Official Form 106A/B Schedule A/B: Property page 5

Deb	or 1 Katherine Lynn Moore		Case number (if known)	
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	st In.	
46. [Oo you own or have any legal or equitable interest in any farm	- or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership I No	t?		
	Yes. Give specific information			
_				
54.	Add the dollar value of all of your entries from Part 7. Write the	hat number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$289,000.00
56.	Part 2: Total vehicles, line 5	\$6,000.00	_	·
57.	Part 3: Total personal and household items, line 15	\$2,350.00		
58.	Part 4: Total financial assets, line 36	\$13,811.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$22,161.00	Copy personal property total	\$22,161.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$311,161.00

Debtor 1	Katherine Lyni	n Moore		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
Case number (if known)				☐ Check if this is an amended filing
				•
Official Fo	orm 106C			_

the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

	,				
spe any fun exe	r each item of property you claim as exempt, ecific dollar amount as exempt. Alternatively applicable statutory limit. Some exemption ds—may be unlimited in dollar amount. Howemption to a particular dollar amount and the the applicable statutory amount.	, you may claim the f s—such as those for vever, if you claim an	ull fa heal exen	ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of penefits, and tax-exempt retirement se under a law that limits the
Pa	Int 1: Identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming?	? Check one only, ever	n if yo	our spouse is filing with you.	
	■ You are claiming state and federal nonbank	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 U	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	,	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	2011 Ford Escape 110,000 miles Line from Schedule A/B: 3.1	\$6,000.00		\$6,000.00	Tenn. Code Ann. § 26-2-103
	Line from Scriedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	couch, loveseat, chairs, recliners, coffee/end tables, lamps, beds,	\$1,500.00		\$1,500.00	Tenn. Code Ann. § 26-2-103
	dressers, nightstands, chests, desk, kitchen table/chairs, refrig, freezer, washer/dryer, microwave, vac, lawnmower, yard tools, small kitchen appliances, misc household goods Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit	
	tvs, dvd, vcr Line from Schedule A/B: 7.1	\$500.00		\$500.00	Tenn. Code Ann. § 26-2-103
	Elic Holli Golledale AVB. 111			100% of fair market value, up to any applicable statutory limit	
	clothes Line from Schedule A/B: 11.1	\$300.00		\$300.00	Tenn. Code Ann. § 26-2-104
	LINE HOTH SCHEUUIE AVD. 11.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Best Case Bankruptcy

ebtor 1	Katherine Lynn Moore			Case number (if known)	<u> </u>
	description of the property and line on edule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	tom jewelry from Schedule A/B: 12.1	\$50.00		\$50.00	Tenn. Code Ann. § 26-2-103
				100% of fair market value, up to any applicable statutory limit	
Cas	h from Schedule A/B: 16.1	\$40.00		\$40.00	Tenn. Code Ann. § 26-2-103
Line	Holli Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	
	cking: US Bank from Schedule A/B: 17.1	\$100.00		\$100.00	Tenn. Code Ann. § 26-2-103
LIIIE	Holli Schedule A/B. 17.1			100% of fair market value, up to any applicable statutory limit	
savings: US Bank		\$60.00		\$60.00	Tenn. Code Ann. § 26-2-103
LITIE	from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	K: thru employer	\$13,000.00		\$13,000.00	Tenn. Code Ann. § 26-2-111(1)(D)
0				100% of fair market value, up to any applicable statutory limit	
	d support: from Schedule A/B: 29.1	\$611.00		\$611.00	Tenn. Code Ann. § 26-2-111(1)(F)
LIIIC	Holli Galledale A.B. 2011			100% of fair market value, up to any applicable statutory limit	20 2(()(())
	you claiming a homestead exemption ject to adjustment on 4/01/22 and every			led on or after the date of adjustme	nt.)
	No				
	Yes. Did you acquire the property cove	red by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

Fill in this information	to identify your	case:					
Debtor 1 Kat	therine Lynn I	Moore					
	Name	Middle Name Last Na	ame		-		
Debtor 2 (Spouse if, filing) First	Name	Middle Name Last Na	ame		-		
United States Bankrupto	cy Court for the:	MIDDLE DISTRICT OF TENNESSEE			-		
Case number(if known)							if this is an ed filing
Official Form 106		\\/\(\lambda\)		les Deserved			
Schedule D: C	reditors	Who Have Claims Seco	urea	by Propert	У		12/15
		two married people are filing together, both ut, number the entries, and attach it to this for					
1. Do any creditors have cl	laims secured by	your property?					
☐ No. Check this bo	ox and submit th	is form to the court with your other schedu	les. Yo	u have nothing else t	to report on this	form.	
Yes. Fill in all of t	he information b	elow.					
Part 1: List All Secu	red Claims						
				Column A	Column B		Column C
for each claim. If more than	n one creditor has	ore than one secured claim, list the creditor sep a particular claim, list the other creditors in Part al order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collar that supports claim		Unsecured portion If any
2.1 Andrew Ward, I Republic Heatir		Describe the property that secures the clair	n: _	\$876.22	\$289,00	00.00	\$0.00
Creditor's Name		104 Oak Court Hendersonville, TN 37075 Sumner County					
Phillip Kirk, Att Ste 200 101 Ker Nashville, TN 3	nner Ave	As of the date you file, the claim is: Check all apply. ☐ Contingent	that				
Number, Street, City, Sta	ate & Zip Code	■ Unliquidated					
	·	☐ Disputed					
Who owes the debt? Ch	eck one.	Nature of lien. Check all that apply.					
■ Debtor 1 only □ Debtor 2 only		An agreement you made (such as mortgage car loan)	e or secu	ired			
Debtor 1 and Debtor 2 of	only	\square Statutory lien (such as tax lien, mechanic's	lien)				
☐ At least one of the debto	ors and another	■ Judgment lien from a lawsuit					
☐ Check if this claim rela	ates to a	Other (including a right to offset)					

Date debt was incurred

Last 4 digits of account number

Debtor 1 Katherine Lynn Moore First Name Middle N		Case number (if known)		
2.2 Caliber Home Loans	Describe the property that secures the claim:	\$237,140.00	\$289,000.00	\$5,358.08
Creditor's Name	104 Oak Court Hendersonville, TN 37075 Sumner County	Ψ207,140.00	Ψ203,000.00	Ψ0,000.00
PO Box 24610 Oklahoma City, OK 73124	As of the date you file, the claim is: Check all that apply.			
Number, Street, City, State & Zip Code	■ Unliquidated □ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or sec car loan)	eured		
☐ Debtor 1 and Debtor 2 only	■ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.3 Capital One Bank	Describe the property that secures the claim:	\$6,136.68	\$289,000.00	\$0.00
Creditor's Name Buffaloe & Assoc	104 Oak Court Hendersonville, TN 37075 Sumner County			
201 4th Ave North Ste 1300 Nashville, TN 37219	As of the date you file, the claim is: Check all that apply.			
Number, Street, City, State & Zip Code	■ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or sec car loan)	cured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.4 City Bank South Dakota	Describe the property that secures the claim:	\$29,007.29	\$289,000.00	\$0.00
Creditor's Name	104 Oak Court Hendersonville, TN 37075 Sumner County			
John Richardson Jr 403A Madison St Clarksville, TN 37040	As of the date you file, the claim is: Check all that apply.			
	Contingent			
Number, Street, City, State & Zip Code	□ Unliquidated □ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or sec car loan)	cured		
Debtor 2 only				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Debtor 1 Katherine Lynn Moore First Name Middle N		e number (_{if known})		
2.5 Houshold Finance Creditor's Name	Describe the property that secures the claim:	\$19,954.89	\$289,000.00	\$0.00
Bufffaloe & Assoc 201 4th Ave North Ste	104 Oak Court Hendersonville, TN 37075 Sumner County			
1300 Nashville, TN 37219	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	■ Unliquidated			
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or secure	d		
☐ Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.6 Mansker Farms Homeowners Assoc Creditor's Name	Describe the property that secures the claim: 104 Oak Court Hendersonville, TN	\$1,243.00	\$289,000.00	\$0.00
Joel P. Surber Plaza 1, Ste 480 Athens	37075 Sumner County			
Way Nashville, TN 37228	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	■ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
_	☐ Disputed	d		
Who owes the debt? Check one. Debtor 1 only Debtor 2 only	☐ Disputed Nature of lien. Check all that apply.	d		
Debtor 1 only	☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or secured)	d		
■ Debtor 1 only □ Debtor 2 only	 ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or secured car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) 	d		
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	 ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or secured car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) 	d		
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a	 ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or secured car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit 	d		
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt Date debt was incurred	□ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) ■ Judgment lien from a lawsuit □ Other (including a right to offset) Last 4 digits of account number			
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt Date debt was incurred	□ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) ■ Judgment lien from a lawsuit □ Other (including a right to offset) Last 4 digits of account number Column A on this page. Write that number here:	\$294,358 \$294,358		

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill in th	his informa	ation to identify your	case:				
Debtor '	1	Katherine Lynn M	oore				
DCDtOI		First Name	Middle Name	Last Name			
Debtor 2		Final					
(Spouse if,	, filing)	First Name	Middle Name	Last Name			
United S	States Banl	kruptcy Court for the:	MIDDLE DISTRIC	T OF TENNESSEE			
Case nu	umber						
(if known)						_	if this is an
						amend	led filing
Officia	al Form	106E/F					
			ho Have Uns	secured Claims			12/15
3e as cor	mplete and	accurate as possible. Us	e Part 1 for creditors	with PRIORITY claims and Par	t 2 for creditors with NON	IPRIORITY claims. Li	ist the other party t
Schedule Schedule left. Attac name and	G: Executor D: Creditor th the Conti	ory Contracts and Unexp rs Who Have Claims Sec nuation Page to this pag ber (if known).	ired Leases (Official F ured by Property. If m e. If you have no info	claim. Also list executory con Form 106G). Do not include any ore space is needed, copy the rmation to report in a Part, do I	/ creditors with partially s Part you need, fill it out, I	secured claims that a number the entries in	are listed in n the boxes on the
Part 1:		of Your PRIORITY Un					
_	any creditor: No. Go to Pai	s have priority unsecure	d claims against you?	•			
_		π 2.					
■ Y		riority unsecured claims	If a creditor has more	than one priority unsecured clai	m list the creditor senarate	ly for each claim. For	each claim listed
ident poss	tify what type sible, list the	e of claim it is. If a claim ha	s both priority and nonger according to the cred	priority amounts, list that claim he itor's name. If you have more tha	ere and show both priority a	and nonpriority amoun	ts. As much as
(For	an explanati	ion of each type of claim, s	ee the instructions for t	this form in the instruction bookle	t.) Total claim	Priority amount	Nonpriority amount
2.1	Internal F	Revenue Service	Last 4 di	gits of account number	\$9,000.00	\$9,000.00	_
	Priority Cred					- <u>- · · · · · · · · · · · · · · · · · ·</u>	<u> </u>
	Special F	Procedures Branch	MDP when wa	as the debt incurred?		-	
		dway, Room 285					
		e, TN 37203		determination the claim in Ch	and all that apply		
		eet City State Zip Code the debt? Check one.	As of the ☐ Contir	e date you file, the claim is: Che	еск ан тат арру		
	Debtor 1 on	lv	_				
	Debtor 2 on	•		uidated			
		d Debtor 2 only	☐ Dispu				
				PRIORITY unsecured claim:			
		of the debtors and anothe	_ ` `	estic support obligations			
		is claim is for a commur		and certain other debts you owe	-		
	No	bject to offset?		s for death or personal injury whi	le you were intoxicated		
	Yes		☐ Other	. Specify			
				2010-2010			
Part 2:		of Your NONPRIORIT					
	•	s have nonpriority unsec					
	No. You have	nothing to report in this p	art. Submit this form to	the court with your other schedu	les.		
■ Y	es.						
unse	ecured claim, one creditor	, list the creditor separately	/ for each claim. For ea	cal order of the creditor who ho ch claim listed, identify what type Part 3.If you have more than thr	of claim it is. Do not list cla	aims already included	in Part 1. If more

Total claim

Official Form 106 E/F

Advanced Health/C & C Neurological Assoc	Last 4 digits of account number	\$756.68
Nonpriority Creditor's Name PO Box 249 Goodlettsville, TN 37070-0249	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
Anesthesia Medical Group Nonpriority Creditor's Name	Last 4 digits of account number	\$150.00
NAB PO Box 198988	When was the debt incurred?	
Nashville, TN 37219-8988	-	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	
AT & T	Last 4 digits of account number	\$112.82
Nonpriority Creditor's Name AFNI PO Box 3517	When was the debt incurred?	
Bloomington, IL 61702-3517		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	□ Continued	
Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify	

Pontict Hospital	Last 4 digits of account number	\$2,769.94
Baptist Hospital Nonpriority Creditor's Name		\$2,769.92
Medical Financial Solutions PO Box 71585	When was the debt incurred?	
Madison Heights, MI 48071		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Capital One	Last 4 digits of account number	\$5,484.62
Nonpriority Creditor's Name Nathan & Nathan 2215 1st Ave S	When was the debt incurred?	ψο, ιο πο
Birmingham, AL 35233 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	■ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Chase	Last 4 digits of account number	\$4,844.16
Nonpriority Creditor's Name LTD Financial Services PO Box 630769	When was the debt incurred?	
Houston, TX 77263-0769 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other Specify	

Katherine Lynn Moore	Case number (if known)	
Citgo	Last 4 digits of account number	\$3,111.05
Nonpriority Creditor's Name Midland Funding Hosto & Buchan PO Box 3397	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Citibank	Last 4 digits of account number	\$21,000.00
Nonpriority Creditor's Name Richardson Law Firm 403 Madison St	When was the debt incurred?	
Clarksville, TN 37040 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	Пол	
Debtor 1 only	Contingent	
Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
GS Sumner Co	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name PO Box 549	When was the debt incurred?	Ψ0.00
Gallatin, TN 37066		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 1 only Debtor 2 only	■ Unliquidated	
Debtor 2 only Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other Specify Notice	

1 Katherine Lynn Moore	Case number (if known)	
Haveahald Finance		¢50,000,00
Household Finance Nonpriority Creditor's Name	Last 4 digits of account number	\$58,000.00
Finkelstein, Kern, Steinburg &	When was the debt incurred?	
Cunnigham		
PO Box 1		
Knoxville, TN 37901 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	no of the date you me, the stain for officer an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	Other. Specify	
Household Finance	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name		
Buffalo & Assoc	When was the debt incurred?	
201 4th Ave North Nashville, TN 37219		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No		
Yes	Other. Specify Notice	
JC Penney Nonpriority Creditor's Name	Last 4 digits of account number	\$828.22
Wanda Cross, Esq	When was the debt incurred?	
PO Box 99		
Collierville, TN 38027 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck an that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	■ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other, Specify	

Katherine Lynn Moore	Case number (if known)	
Lab Corp	Last 4 digits of account number	\$169.0
Nonpriority Creditor's Name	When was the debt incurred?	<u> </u>
PO Box 2240 Burlington, NC 27216		
lumber Street City State Zip Code Vho incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	Other. Specify	
Lowes	Last 4 digits of account number	\$1,222.6
Nonpriority Creditor's Name National Credit Solutions, LLS PO Box 15779	When was the debt incurred?	
Oklahoma City, OK 73155-0779	_	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Contingent	
Debtor 1 only	_	
Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	
Madison Minor Medical		\$127.0
Nonpriority Creditor's Name 1114 North Gallatin Rd	Last 4 digits of account number When was the debt incurred?	ΨΙΖΙΚ
Madison, TN 37115-2738 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	

Katherine Lynn Moore	Case number (if known)	
Mansker Farms Homeowners	Last 4 digits of account number	\$1,503.0
Nonpriority Creditor's Name Surber, Asher, Surber & Moushon Plaza 1, Ste 480	When was the debt incurred?	
Nashville, TN 37228 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	■ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
Murray & Assoc, CPA	Last 4 digits of account number	\$2,166.5
Nonpriority Creditor's Name	When was the debt incurred?	
Hendersonville, TN 37075 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Northland Group	Last 4 digits of account number	\$2,287.6
Nonpriority Creditor's Name Portfolio Recovery Associats PO Box 12903	When was the debt incurred?	
Norfolk, VA 23541 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset? —	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	

Old Hickory Lane ER Phys	Last 4 digits of account number	\$1,542.0
Nonpriority Creditor's Name PO Box 37984	When was the debt incurred?	
Philadelphia, PA 19101-7984 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
Premier Radiology	Last 4 digits of account number	\$300.5
Nonpriority Creditor's Name PO Box 292617	When was the debt incurred?	
Nashville, TN 37229 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	
Radiology Alliance Nonpriority Creditor's Name	Last 4 digits of account number	\$487.0
Premier Credit 210 25th Ave N. Ste 602	When was the debt incurred?	
Nashville, TN 37203 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The state of the s	
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	

Katherine Lynn Moore	Case number (if known)	
Radiology Alliance	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name Fox Collections PO Box 528	When was the debt incurred?	
Goodlettsville, TN 37070		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Notice	
Republic Finance	Last 4 digits of account number	\$1,675.00
Nonpriority Creditor's Name 1140 Roma Ave	When was the debt incurred?	
Hammond, LA 70403 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	
Rooms To Go/GE Moneybank	Last 4 digits of account number	\$2,148.81
Nonpriority Creditor's Name		<u> </u>
Wanda Cross, Esq PO Box 99	When was the debt incurred?	
Collierville, TN 38027 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes		

Skyline Women's Health/Dr. Miller	Last 4 digits of account number	\$196.0
Nonpriority Creditor's Name 1210 Briarville Rd Bldg A Madison, TN 37115	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	
St Thomas Hospital	Last 4 digits of account number	\$326.
Nonpriority Creditor's Name Nashville Adjustment Bureau PO Box 198988	When was the debt incurred?	
Nashville, TN 37219-8988 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Sumner Regional	Last 4 digits of account number	\$400.
Nonpriority Creditor's Name PO Box 779	When was the debt incurred?	
Gallatin, TN 37066 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	

Katherine Lynn Moore	Case number (if known)	
Tri Star Med Ctr	Last 4 digits of account number	\$4,590.31
Nonpriority Creditor's Name Medicredit, Inc PO Box 1629	When was the debt incurred?	Ψ-1,000.01
Maryland Heights, MO 63043-0629 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Tri Star/MeadowLark	Last 4 digits of account number	\$3,102.00
Nonpriority Creditor's Name Harvard Collection Srv 4839 North Elston Ave	When was the debt incurred?	
Chicago, IL 60630-2534 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
US Bank	Last 4 digits of account number	\$1,329.35
Nonpriority Creditor's Name		4 1,5 = 510
Fenton Law Firm 2700 Stanley Gault Pky	When was the debt incurred?	
Louisville, KY 40223 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	

Official Form 106 E/F

Katherine Lynn Moore	Case number (if known)	
Vanderbilt Childrens Hospital	Last 4 digits of account number	\$1,595.00
Nonpriority Creditor's Name Affiliated Creditors, Inc 176 Thompson Lane	When was the debt incurred?	
Nashville, TN 37211 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
Vanderbilt Childrens Hospital	Last 4 digits of account number	\$35.00
Nonpriority Creditor's Name Dept 1171 PO Box 121171	When was the debt incurred?	
Dallas, TX 75312 Jumber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent	
Debtor 1 only		
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
/anderbilt Medical Group	Last 4 digits of account number	\$409.00
Nonpriority Creditor's Name Dept 1208 PO Box 121208	When was the debt incurred?	
Dallas, TX 75312-1208 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	П	
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Wobegone	Last 4 digits of account number	\$525.50
Nonpriority Creditor's Name		
Terry Canady Esq	When was the debt incurred?	
223 Madison St Ste 205		
Madison, TN 37115	_	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	Other. Specify	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
otal aims				
om Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 9,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 9,000.00
				Total Claim
otal	6f.	Student loans	6f.	\$ 0.00
aims om Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6~	\$ 0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 123,195.46
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 123,195.46

Fill in this information to identify your case:								
Debtor 1	Katherine Lynn M							
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF	TENNESSEE					
Case number _					☐ Check if amende	this is an		
					amende	u iiiiig		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease State what the contract or lease is for Name, Number, Street, City, State and ZIP Code 2.1 Verizon cell phone PO Box 105378 Atlanta, GA 30348

Fill in this info	rmation to identify your	case:			
Debtor 1	Katherine Lynn M				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	MIDDLE DISTRICT OF	TENNESSEE		
Case number (if known)					☐ Check if this is an amended filing
	orm 106H e H: Your Cod	ebtors			12/15
people are filin fill it out, and n your name and	g together, both are equi umber the entries in the case number (if known)	ally responsible for supp	olying correct information the Additional Page to	on. If more space is this page. On the to	rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write
□ No ■ Yes					
		ı lived in a community pr Nevada, New Mexico, Pu			ty states and territories include)
■ No. Go t □ Yes. Did		use, or legal equivalent live	e with you at the time?		
in line 2 ag	gain as a codebtor only i o), Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make sı	ure you have listed	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fil
	mn 1: Your codebtor Number, Street, City, State and ZI	P Code		Column 2: The cr Check all schedu	editor to whom you owe the debt les that apply:
115	mond Moore Grove Lane South dersonville, TN 37075			■ Schedule D, □ Schedule E/F □ Schedule G Caliber Home I	-, line

	in this information to identify your countries to the state of the sta											
De	btor 2	yiiii iiioore										
` '	ited States Bankruptcy Court for the	: MIDDLE DISTRICT C	F TENNESSEE									
Case number (If known)						Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:						
0	fficial Form 106I					MM	1 / DD/ Y	YYY				
S	chedule I: Your Inc	ome				12 <i>l</i> ′						
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing w	ng jointly, and your ith you, do not inclu	spouse i	s liv natio	ring with yo on about y	ou, inclu our spo	ide inform use. If mo	ation ab	out your e is needed,		
1.	Fill in your employment information.	Debtor 1			I	Debtor 2 or non-filing spouse						
	If you have more than one job,	Employment status	■ Employed			I	☐ Employed					
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not employed					
	employers.	Occupation	Admin									
	Include part-time, seasonal, or self-employed work.	Employer's name	Deloitte									
	Occupation may include student or homemaker, if it applies.	Employer's address	4022 Sells Drive Hermitage, TN	-								
		How long employed t	here?									
Pa	rt 2: Give Details About Mor	nthly Income										
	imate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write \$	0 in the	space. Incl	ude you	r non-filing		
•	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all e	emplo	oyers for th	at perso	n on the lin	es belov	v. If you need		
						For Debte	or 1	For Deb		se		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	4,3	61.54	\$	N	I/A		
3.	Estimate and list monthly overt	ime pay.		3.	+\$	6	61.48	+\$	N	I/A		

5,023.02

N/A

Calculate gross Income. Add line 2 + line 3.

				For	Debtor 1		ebtor 2 or ling spouse	
	Сору	line 4 here	4.	\$	5,023.02	\$	N/A	
5.	List a	all payroll deductions:			<u> </u>			-
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	433.19	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	451.42	\$	N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	-
	5d.	Required repayments of retirement fund loans	5d.	\$-	0.00	\$	N/A	-
	5e.	Insurance	5e.	\$	510.28	\$	N/A	-
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	=
	5g.	Union dues	5g.	\$_	0.00	\$	N/A	-
	5h.	Other deductions. Specify: life insurance	5h.+	· · · · · · · · · · · · · · · · · · ·	56.62	· —	N/A	-
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,451.51	\$	N/A	_
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,571.51	\$	N/A	-
8.	List a 8a.	Net income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	_
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	-
	8d.	Unemployment compensation	8d.	\$-	0.00	\$	N/A	
	8e.	Social Security	8e.	\$_	0.00	\$	N/A	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	-
	8g.	Pension or retirement income	 8g.	\$	0.00	\$	N/A	-
	8h.	Other monthly income. Specify:	8h.+	• \$	0.00	+ \$	N/A	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	<u> </u>
10.		alate monthly income. Add line 7 + line 9. he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	3	\$,571.51 + \$_		N/A = \$	3,571.51
11.	Includ other	all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. In the property of	depen	•	•		nedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$	3,571.51
13.	Do yo	ou expect an increase or decrease within the year after you file this form No.	?				Combir monthly	ned y income
		Yes. Explain:						

	in thic informat	tion to identify yo	ur caca:							
	iii tiiis iiiioiiiiai	nor to identity yo	our case.							
Deb	Katherine Lynn Moore				Check if this is:					
Deb	□ An amended filing Debtor 2 □ A supplement showing postpetition chapter							oter		
	ouse, if filing)								the following date:	0101
Unit	ed States Bankri	uptcy Court for the:	: MIDDLE	E DISTRICT OF TENNES	SEE		М	M / DD / YYYY		
Coo	a numbar									
1	e numbe r nown)									
Of	fficial Fo	rm 106J								
Sc	chedule	J: Your I	Exper	ises						12/15
Be info	as complete a	and accurate as	possible. eded, atta	If two married people a ch another sheet to this						
Par		ibe Your House	hold							
1.	Is this a join									
	■ No. Go to			ate household?						
			n a sepan	ate nousenoid?						
	□ No	-	t file Offici	al Form 106J-2, <i>Expense</i>	s for Senarate House	shold of D	ohtor	. 2		
			or file Offici	air oilli 1005-2, <i>Expense</i>	s for Separate Flouse	inola of D	CDIO	۷.		
2.	Do you have	e dependents?	☐ No							
	Do not list De Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?	
	Do not state	the							□ No	
	dependents i				Daughter			13 years	Yes	
									□ No	
					Daughter			15 years	Yes	
									☐ No	
									Yes	
									□ No	
3.	Do your eyn	enses include	_						☐ Yes	
J.	expenses of	people other the pour depender	han $_{f \Box}$	No Yes						
Par	t 2: Estima	ate Your Ongoir	ng Monthl	y Expenses						
exp	imate your ex	penses as of yo	our bankrı	uptcy filing date unless y is filed. If this is a sup						
Incl	luda avnanco	s naid for with r	non-cash	government assistance	if you know					
				sluded it on Schedule I:						
(Off	ficial Form 10	6I.)				-	_	Your expe	enses	
4.		r home owners		ses for your residence.	Include first mortgage	e 4.	\$		1,200.00	
	If not includ	,	J :				-			
	As Posts	etate tavae				40	Ф		0.00	
		state taxes rty, homeowner's	s, or renter	's insurance		4a. 4b.			0.00 0.00	
		•		ipkeep expenses		4c.	- 1 -		100.00	
		owner's associat				4d.	- 1 -		55.00	
5.	Additional n	nortgage payme	ents for yo	our residence, such as he	ome equity loans	5.	\$		0.00	

Debtor 1	Katherine Lynn M				
	First Name	Middle Name	Last Name		
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name		
Inited States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF 1	TENNESSEE		
Case number					
f known)				_	theck if this is an mended filing
			Debtor's Sch		12/1
ears, or both. 1	8 U.S.C. §§ 152, 1341, 1	E10, and 2E71		· · · · · · · · · · · · · · · · · · ·	
	n Below				
	n Below		ney to help you fill out banl	kruptcy forms?	
	n Below		ney to help you fill out banl	kruptcy forms?	
Did you pa	n Below		ney to help you fill out banl	kruptcy forms? Attach Bankruptcy Petitic Declaration, and Signatu	
Did you pay No Yes. N	n Below ny or agree to pay some Name of person	one who is NOT an attorr	ney to help you fill out banl	Attach Bankruptcy Petiti Declaration, and Signatu	
Did you page No Yes. No Under pena that they are	n Below ny or agree to pay some Name of person alty of perjury, I declare	one who is NOT an attorr		Attach Bankruptcy Petiti Declaration, and Signatu	
Did you pay No Yes. No Under pena that they are X /s/ Kather	n Below ny or agree to pay some Name of person alty of perjury, I declare true and correct.	one who is NOT an attorr	nary and schedules filed w	Attach Bankruptcy Petiti Declaration, and Signatu rith this declaration and	
Did you pay No Yes. No Under pena that they are X /s/ Kather Signature	n Below ny or agree to pay some Name of person alty of perjury, I declare true and correct. cherine Lynn Moore rine Lynn Moore	one who is NOT an attorr	nary and schedules filed w	Attach Bankruptcy Petiti Declaration, and Signatu rith this declaration and	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

Fill	in this inform	nation to identify you	r case:			
	tor 1	Katherine Lynn				
DOD	101 1	First Name	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
		nkruptcy Court for the:	MIDDLE DISTRICT OF T	ENNESSEE		
		., .,				
(if kno	e number 				_	heck if this is an mended filing
	icial Fo					
Sta	tement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/19
infor	mation. If m		attach a separate sheet to		equally responsible for sup y additional pages, write you	
	<u> </u>	etails About Your Ma	rital Status and Where You	Lived Before		
	■ Married □ Not mar		-			
			Providence of the discount			
2.	During the ia	ist 3 years, nave you	lived anywhere other than	wnere you live now?		
	■ No □ Yes. List	t all of the places you li	ived in the last 3 years. Do no	ot include where you live now	<i>1</i> .	
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory	
	■ No					
	_	ke sure you fill out Sch	nedule H: Your Codebtors (Of	ficial Form 106H).		
Pari	2 Explain	n the Sources of You	r Income			
	Fill in the tota	I amount of income you	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
	_	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	last calenda nuary 1 to De	r year: cember 31, 2018)	■ Wages, commissions, bonuses, tips	\$49,253.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

		* Subject	to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment
Yes.		or Debtor 2 or both have primarily consumer debts. 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?	
		□ No. ■ Yes	Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that

not include payments to an attorney for this bankruptcy case.

Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do

xxx monthly \$1,200.00 \$0.00 ■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
_	xxx	monthly	\$1,200.00	\$0.00	☐ Car☐ Credit Card☐ Loan Repayment☐ Suppliers or vendors

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

 \square No.

☐ Yes

Go to line 7.

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.								
	Person Who Received Transfer Address	Description and value of property transferred	pa	escribe any property or syments received or debts aid in exchange	Date transfer was made				
	Person's relationship to you		•	· ·					
19.	Within 10 years before you filed for bankruptcy, obeneficiary? (These are often called asset-protection No Yes. Fill in the details.	did you transfer any property to on devices.)	o a self-se	ettled trust or similar device o	f which you are a				
	Name of trust	Description and value of the	property t	ransferred	Date Transfer was made				
Par	8: List of Certain Financial Accounts, Instrum	ents Safe Denosit Boxes and	l Storage l	Units					
ı aı	List of Certain Financial Accounts, instituti	ierits, dare Deposit Boxes, and	Storage	Onits					
20.	Within 1 year before you filed for bankruptcy, we sold, moved, or transferred? Include checking, savings, money market, or oth houses, pension funds, cooperatives, associatio No Yes. Fill in the details.	er financial accounts; certifica	ites of dep						
		t 4 digits of Type of ac ount number instrumen		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer				
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?								
	□ No								
	Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)		ibe the contents	Do you still have it?				
	US Bank Hendersonville, TN 37075	debtor and Raymond Moore	\$100. depo daug *Deb	o tapes, papers, approx .00 in certificate of sits and bonds for hter tors have lost the keys cannot access the box	□ No ■ Yes				
22.	Have you stored property in a storage unit or pla	ce other than your home withi	n 1 year b	efore you filed for bankruptcy	/?				
	■ No								
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Descr	ibe the contents	Do you still have it?				

Pai	t 9: Identify Property You Hold or Control for S	Someone Else							
23.	Do you hold or control any property that someofor someone.	ne else owns? Include any prope	rty y	ou borrowed from, are storing fo	r, or hold in trust				
	No The state of th								
	Yes. Fill in the details.	W		" 4	., .				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value				
Pai	t 10: Give Details About Environmental Informa	ation							
or	the purpose of Part 10, the following definitions a	apply:							
	Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these sub	r, land, soil, surface water, groun	_	•					
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	sites.		•					
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		s wa	ste, hazardous substance, toxic	substance,				
₹ер	ort all notices, releases, and proceedings that yo	u know about, regardless of whe	n the	ey occurred.					
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	e und	der or in violation of an environm	ental law?				
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.								
	■ No								
	☐ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case				
Pai	t 11: Give Details About Your Business or Con	nections to Any Business							
27.	Within 4 years before you filed for bankruptcy, d	lid vou own a business or have a	nv of	f the following connections to an	v business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	□ A partner in a partnership								
	☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation								
	_	-							
	An owner of at least 5% of the voting or	equity securities of a corporation	1						

Deb	otor 1 Katherine Lynn Moore		Case number (if known)
	■ No. None of the above applies. Go to F	Part 12.	
	☐ Yes. Check all that apply above and fill	in the details below for each business	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	ccy, did you give a financial statement to	o anyone about your business? Include all financial
	■ No □ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	rt 12: Sign Below		
are t		false statement, concealing property, o	d I declare under penalty of perjury that the answers or obtaining money or property by fraud in connection years, or both.
	Katherine Lynn Moore		
	therine Lynn Moore nature of Debtor 1	Signature of Debtor 2	
Dat	te July 29, 2019	Date	
Did ■ N		ent of Financial Affairs for Individuals F	iling for Bankruptcy (Official Form 107)?
Did ■ N	you pay or agree to pay someone who is not	t an attorney to help you fill out bankru	ptcy forms?
-	**	ptcy Petition Preparer's Notice, Declaratio	on, and Signature (Official Form 119).

Fill in this inform	mation to identify your	0250		
Debtor 1	Katherine Lynn M			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	MIDDLE DISTRI	CT OF TENNESSEE	
Case number				
(if known)				Check if this is an
				amended filing
Official Fo		n for Indi	viduals Filing Under Chapte	er 7 12/15
Otaterrici	it or intentio	<u> </u>	viduais i ming officer official	12/15
	vidual filing under cha		ill out this form if:	
_	e claims secured by yo			
	ed personal property a s form with the court w		not expired. •r you file your bankruptcy petition or by the date se	t for the meeting of creditors,
	ver is earlier, unless th		he time for cause. You must also send copies to the	
	eople are filing together and date the form.	[·] in a joint case, b	oth are equally responsible for supplying correct in	formation. Both debtors must
	and accurate as possib our name and case nun		is needed, attach a separate sheet to this form. On t	the top of any additional pages,
Part 1: List Yo	our Creditors Who Have	e Secured Claims		
		art 1 of Schedule	D: Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
	editor and the property the	nat is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's C	aliber Home Loans		Surrender the property	□No
name:			Surrender the property.Retain the property and redeem it.	1 10
Description of	104 Ook Court Hor	doroonvillo	☐ Retain the property and enter into a	Yes
property	104 Oak Court Her TN 37075 Sumner		Reaffirmation Agreement. Retain the property and [explain]:	
securing debt:				_
Part 2: List Yo	our Unexpired Persona	I Property Leases	.	
For any unexpire in the informatio	ed personal property le n below. Do not list rea	ase that you listed Il estate leases. U	d in Schedule G: Executory Contracts and Unexpire nexpired leases are leases that are still in effect; the f the trustee does not assume it. 11 U.S.C. § 365(p)(2	e lease period has not yet ended.
				<u></u>
Describe your u	nexpired personal prop	perty leases		Will the lease be assumed?
Lessor's name:	Verizon			□ No
				■ Yes
Description of lea	ased cell phone			
Part 3: Sign B	Below			
Official Form 108		Statement of	Intention for Individuals Filing Under Chapter 7	page 1

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

Det	Katherine Lynn Moore	Case number (if known)
	ler penalty of perjury, I declare that I have indicated roperty that is subject to an unexpired lease. /s/ Katherine Lynn Moore	my intention about any property of my estate that secures a debt and any personal
^	Katherine Lynn Moore	Signature of Debtor 2
	Signature of Debtor 1	
	Date July 29, 2019	Date

Statement of Intention for Individuals Filing Under Chapter 7

page 2

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter	7:	Liquidation
(\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
,	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Best Case Bankruptcy

United States Bankruptcy Court Middle District of Tennessee

In re	Katherine Lynn Moore		Case No).	
	<u> </u>	Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing per rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	y, or agreed to be pa	id to me, for services rendered or to	Э
	For legal services, I have agreed to accept		s	975.00	
	Prior to the filing of this statement I have received		\$	350.00	
	Balance Due		\$	625.00	
2.	335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	n unless they are me	mbers and associates of my law fir	m.
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name				
6.	In return for the above-disclosed fee, I have agreed to rer	nder legal service for all aspec	cts of the bankruptc	case, including:	
	a. Analysis of the debtor's financial situation, and render of the debtor at the meeting of creditor of the debtor	ement of affairs and plan which	h may be required;		
7.	By agreement with the debtor(s), the above-disclosed fee a. These fees do not include certain cos costs, credit counseling costs, and the c b. The contract between the parties does Client is served with an adversary proces represent Client's best interest until sucl litigate the matter, Client affirmatively de Attorney is allowed to withdraw by the C	ts associated with this cast to obtain Client's cress not include fees for repeding complaint, Attorned time as either Client infections Attorney's representations.	ase. Client shall dit report, if nece resenting Client y shall take appr orms Attorney th	ssary. in adversary proceedings opriate steps to protect and at Client does not wish to	
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	or payment to me fo	representation of the debtor(s) in	
J	uly 29, 2019	/s/ Richard Bara	nyi		
_	ate	Richard Barany			
		Signature of Attorn Richard Barany			
		PO Box 2183	TN 07077 0400		
		Hendersonville, 615-824-3877 F	TN 37077-2183 ax: 615-824-4290		
		bbrb@bellsouth			
		Name of law firm			

United States Bankruptcy Court Middle District of Tennessee

in re	Katherine Lynn Woore		Case No.	
		Debtor(s)	Chapter	7
	VEI	RIFICATION OF CREDITOR	MATRIX	
The ab	ove-named Debtor hereby verific	s that the attached list of creditors is true and o	correct to the best	of his/her knowledge.
Date:	July 29, 2019	/s/ Katherine Lynn Moore Katherine Lynn Moore		
		Signature of Debtor		

KATHERINE LYNN MOORE 104 OAK COURT HENDERSONVILLE TN 37075

RICHARD BARANYI RICHARD BARANYI PO BOX 2183 HENDERSONVILLE, TN 37077-2183

ADVANCED HEALTH/C & C NEUROLOGICAL ASSOC PO BOX 249 GOODLETTSVILLE TN 37070-0249

ANDREW WARD, DBA REPUBLIC HEATING & COOL PHILLIP KIRK, ATTY STE 200 101 KENNER AVE NASHVILLE TN 37205

ANESTHESIA MEDICAL GROUP NAB PO BOX 198988 NASHVILLE TN 37219-8988

AT & T AFNI PO BOX 3517 BLOOMINGTON IL 61702-3517

BAPTIST HOSPITAL
MEDICAL FINANCIAL SOLUTIONS
PO BOX 71585
MADISON HEIGHTS MI 48071

CALIBER HOME LOANS PO BOX 24610 OKLAHOMA CITY OK 73124

CAPITAL ONE
NATHAN & NATHAN
2215 1ST AVE S
BIRMINGHAM AL 35233

CAPITAL ONE BANK BUFFALOE & ASSOC 201 4TH AVE NORTH STE 1300 NASHVILLE TN 37219

CHASE LTD FINANCIAL SERVICES PO BOX 630769 HOUSTON TX 77263-0769 CITGO
MIDLAND FUNDING
HOSTO & BUCHAN PO BOX 3397
LITTLE ROCK AR 72203

CITIBANK
RICHARDSON LAW FIRM
403 MADISON ST
CLARKSVILLE TN 37040

CITY BANK SOUTH DAKOTA JOHN RICHARDSON JR 403A MADISON ST CLARKSVILLE TN 37040

GS SUMNER CO PO BOX 549 GALLATIN TN 37066

HOUSEHOLD FINANCE FINKELSTEIN, KERN, STEINBURG & CUNNIGHAM PO BOX 1 KNOXVILLE TN 37901

HOUSEHOLD FINANCE BUFFALO & ASSOC 201 4TH AVE NORTH NASHVILLE TN 37219

HOUSHOLD FINANCE BUFFFALOE & ASSOC 201 4TH AVE NORTH STE 1300 NASHVILLE TN 37219

INTERNAL REVENUE SERVICE SPECIAL PROCEDURES BRANCH MDP 146 801 BROADWAY, ROOM 285 NASHVILLE TN 37203

JC PENNEY WANDA CROSS, ESQ PO BOX 99 COLLIERVILLE TN 38027

LAB CORP LCA PO BOX 2240 BURLINGTON NC 27216

LOWES
NATIONAL CREDIT SOLUTIONS, LLS
PO BOX 15779
OKLAHOMA CITY OK 73155-0779

MADISON MINOR MEDICAL 1114 NORTH GALLATIN RD MADISON TN 37115-2738

MANSKER FARMS HOMEOWNERS SURBER, ASHER, SURBER & MOUSHON PLAZA 1, STE 480 NASHVILLE TN 37228

MANSKER FARMS HOMEOWNERS ASSOC JOEL P. SURBER PLAZA 1, STE 480 ATHENS WAY NASHVILLE TN 37228

MURRAY & ASSOC, CPA 641 E MAIN HENDERSONVILLE TN 37075

NORTHLAND GROUP PORTFOLIO RECOVERY ASSOCIATS PO BOX 12903 NORFOLK VA 23541

OLD HICKORY LANE ER PHYS PO BOX 37984 PHILADELPHIA PA 19101-7984

PREMIER RADIOLOGY PO BOX 292617 NASHVILLE TN 37229

RADIOLOGY ALLIANCE PREMIER CREDIT 210 25TH AVE N. STE 602 NASHVILLE TN 37203

RADIOLOGY ALLIANCE FOX COLLECTIONS PO BOX 528 GOODLETTSVILLE TN 37070

RAYMOND MOORE 115 GROVE LANE SOUTH HENDERSONVILLE TN 37075

REPUBLIC FINANCE 1140 ROMA AVE HAMMOND LA 70403

ROOMS TO GO/GE MONEYBANK WANDA CROSS, ESQ PO BOX 99 COLLIERVILLE TN 38027

SKYLINE WOMEN'S HEALTH/DR. MILLER 1210 BRIARVILLE RD BLDG A MADISON TN 37115

ST THOMAS HOSPITAL
NASHVILLE ADJUSTMENT BUREAU
PO BOX 198988
NASHVILLE TN 37219-8988

SUMNER REGIONAL PO BOX 779 GALLATIN TN 37066

TRI STAR MED CTR
MEDICREDIT, INC
PO BOX 1629
MARYLAND HEIGHTS MO 63043-0629

TRI STAR/MEADOWLARK HARVARD COLLECTION SRV 4839 NORTH ELSTON AVE CHICAGO IL 60630-2534

US BANK
FENTON LAW FIRM
2700 STANLEY GAULT PKY
LOUISVILLE KY 40223

VANDERBILT CHILDRENS HOSPITAL AFFILIATED CREDITORS, INC 176 THOMPSON LANE NASHVILLE TN 37211

VANDERBILT CHILDRENS HOSPITAL DEPT 1171 PO BOX 121171 DALLAS TX 75312

VANDERBILT MEDICAL GROUP DEPT 1208 PO BOX 121208 DALLAS TX 75312-1208

WOBEGONE TERRY CANADY ESQ 223 MADISON ST STE 205 MADISON TN 37115